Exporter Page

Exporter EPA Identification Number: D02843/6e/11 Exporter Mailing Street Address: 1405 STATE ROUTE 18 SUITE 209 Exporter Mailing City: OLD BRIDGE Exporter Mailing Zip Code: Exporter Mailing Country: USA Exporter Site Street Address: 1405 STATE ROUTE 18 SUITE 209 Exporter Mailing Country: USA Exporter Site Street Address: 1405 STATE ROUTE 18 SUITE 209 Exporter Site State: NEW JERSEY Exporter Site City: OLD BRIDGE Exporter Site State: NEW JERSEY Exporter Site Zip Code: Exporter Site Zip Code: USA Calendar Year Covered by Report: Exporter Certification I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information. I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA Exporter Signature:	Exporter Name:	NORTH AMERICAN RECYCLING LLC		
Exporter Mailing Street Address: Exporter Mailing City: OLD BRIDGE Exporter Mailing State: NEW JERSEY Exporter Mailing Zip Code: Exporter Mailing Country: USA Exporter Site Street Address: Exporter Site State: Exporter Site State: Exporter Site Zip Code: Exporter Site Zip Code: Exporter Site Country: USA Calendar Year Covered by Report: Certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA				Name and Advisor of the Control
Exporter Mailing City: Exporter Mailing State: Exporter Mailing Zip Code: Exporter Mailing Country: USA Exporter Site Street Address: Exporter Site City: OLD BRIDGE Exporter Site State: Exporter Site Zip Code: Exporter Site Zip Code: Exporter Site Country: USA Calendar Year Covered by Report: Exporter Certification I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA				
Exporter Mailing State: Exporter Mailing Zip Code: Exporter Mailing Country: Exporter Site Street Address: 1405 STATE ROUTE 18 SUITE 209 Exporter Site City: OLD BRIDGE Exporter Site State: NEW JERSEY Exporter Site Zip Code: Exporter Site Country: USA Calendar Year Covered by Report: Calendar Year Covered by Report: Exporter Certification I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA				
Exporter Mailing Zip Code: Exporter Mailing Country: USA Exporter Site Street Address: I 405 STATE ROUTE 18 SUITE 209 Exporter Site City: OLD BRIDGE Exporter Site State: NEW JERSEY Exporter Site Zip Code: Exporter Site Country: USA Calendar Year Covered by Report: Exporter Certification I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA			· · ·	
Exporter Mailing Country: Exporter Site Street Address: 1405 STATE ROUTE 18 SUITE 209 Exporter Site City: OLD BRIDGE Exporter Site State: NEW JERSEY Exporter Site Zip Code: Exporter Site Country: USA Calendar Year Covered by Report: Exporter Certification Certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRAMA				
Exporter Site Street Address: Exporter Site City: OLD BRIDGE Exporter Site State: NEW JERSEY Exporter Site Zip Code: Exporter Site Country: USA Calendar Year Covered by Report: Exporter Certification Certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA				0.1000/110000 1100/11011
Exporter Site City: Exporter Site State: Exporter Site Zip Code: Exporter Site Country: USA Calendar Year Covered by Report: Exporter Certification Certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA		1405 STATE ROUTE 18 SUITE 209		
Exporter Site State: Exporter Site Zip Code: Exporter Site Country: USA Calendar Year Covered by Report: Exporter Certification Certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA				
Exporter Site Zip Code: Exporter Site Country: USA Calendar Year Covered by Report: Exporter Certification Certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRAMA		NEW JERSEY		
Calendar Year Covered by Report: Exporter Certification Certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA				
Exporter Certification I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information; I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA		USA		
certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA	Calendar Year Covered by Report:	2011		Andress
all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment. Exporter Printed Name: ANMOL BUDHIRADA				
Exporter Signature:	Exporter Certification			
Exporter Signature:	certify under penalty of law that I have personal all attached documents, and that based on my in information, I believe that the submitted informati significant penalties for submitting false informati	ly examined and am familiar with the information submitted in this and quiry of those individuals immediately responsible for obtaining the on is true, accurate, and complete. I am aware that there are on including the possibility of fine and imprisonment.		3112
	certify under penalty of law that I have personal all attached documents, and that based on my in information, I believe that the submitted informati significant penalties for submitting false informati	ly examined and am familiar with the information submitted in this and quiry of those individuals immediately responsible for obtaining the on is true, accurate, and complete. I am aware that there are on including the possibility of fine and imprisonment.		
Date of Signature:	certify under penalty of law that I have personal all attached documents, and that based on my information, I believe that the submitted information significant penalties for submitting false information that the submitting false information is submitted to the submitting false information in the submitting false information is submitted to the submitted	ly examined and am familiar with the information submitted in this and quiry of those individuals immediately responsible for obtaining the on is true, accurate, and complete. I am aware that there are on including the possibility of fine and imprisonment.		

アデルスのこれに



1405 State Route 18 S Suite - 209 Old Bridge, NJ - 08857 T: 732.481.9000 F: 732.481.9001

NORTH AMERICA

OFFICE OF ENFORMENT AND COMPLIANCE TO SOME OF FEDERAL ACTIVITIES 2254 AT TATREMONATIONAL COMPLIANCE ACSURADOR DIVISION E PA 1200 BENNSYLVANOIA AVENUE, NW WASHINGTON, DC 20460

n i ammi i ammi a a mini m i i

me and toxicity of waste nparison to previous years to e for years prior to 1984:

Export Data by Destination

Receiving Facility Name	Receiving Facility Street Address	Receiving Facility City	Receiving Facility State or Province	Receivin g Facility Zip Code	Receiving	Hazardous Waste Description	Applicable RCRA Hazardous Waste Code(s)	Applicable OECD Waste Codes [if submitting report under 40 CFR 262.87(a)]	DOT Hazard Class	Total Quantity Shipped During Reporting Year	Units for Total Quantity Shipped	Total Number of Shipments During Reporting Year	Transporter Name	Transporter EPA ID Number (required if transporter carried hazardous waste with RCRA manifest in US)	Transporter Name	Transporter EPA ID Number (required if transporter carried hazardous waste with RCRA manifest in US)	Transporter Name
JOONG-IL	SEONG GOKDON, AN	SAN WON-GU				SLABS	D002,D008	A1160	CLASS 8	161.984 M	161.984M	5	WORLD	52611552009			
								5				-					-

Acceptable Units of Measurement	
G = Gallons (liquids only)	
K = Kilograms	
L = Liters (liquids only)	
M = Metric Tons (1000 kilograms)	
N = Cubic Meters	
P = Pounds	
T = Tons (2000 pounds)	
Y = Cubic Yards	